

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	sm l	71002	9/27/99
O.I.P.E. CLASSIFIER		48	9/30/99
FORMALITY REVIEW	DB	65373	10/4/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/27/99
2	9/27/99
3	9/27/99
4	9/27/99
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Claim	Date
Final Original	
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100	9/27/99

Claim	Date
Final Original	
101	9/27/99
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If more than 150 claims or 10 actions  
staple additional sheet here